DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION. (37 CFR 1.63) and POWER OF ATTORNEY

Declaration Submitted with Initial Filing

(Application Number)

☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)

Attorney Docket Number First Named Inventor: COMPLETE IF KNOWN Application Number: Filing Date: Group Art Unit: Examiner Name:	: 2033.000 Qun WEI et al.			
As a below named inventor, I h	nereby declare that:			
My residence, mailing address, a				
I believe I am the original, first a names are listed below) of the su	and sole inventor (if only one in abject matter which is claimed a	name is listed below) or an o and for which a patent is soug	riginal, first and joint ht on the invention en	inventor (if plural titled:
,	Pharmaceutical Composition	Containing Calcineurin B S	ubunit	
I hereby state that I have revie amended by any amendment sp I acknowledge the duty to disc continuation-in-part applications the national or PCT international I hereby claim foreign priority b certificate, or 365(a) of any PC	ecifically referred to above. lose information which is mat, material information which be filling date of the continuation-ienefits under 35 U.S.C. 119(a T international application which also identified below, by checking the continuation of t	erial to the patentability as decame available between the n-part application. (d) or 365(b) of any foreign designated at least one coing the box, any foreign application ap	specification, including defined in 37 CFR 1 filling date of the price application(s) for particularly other than the leation for patent or investigation.	.56, including for or application and attent or inventor's United States of
or any PCT international applica	tion having a filing date before	that of the application on which	n priority is claimed.	
Prior Foreign Application(s)	·		Priority Not Claimed	Certified Copy Attached?
00.447040.0	China	August 26, 1998		□ Yes □ No
98 117642.9 (Number)	(Country)	(Foreign Filing Date)		_
(IAUTIDEI)	(Souther)	() (∵ □ Yes □ No
(Alicenhan)	(Country)	(Foreign Filing Date)		00
(Number)	(Country)	(1 0, 0.9.1 19 2210)		□ Yes □ No
	(0 -1-1)	(Foreign Filing Date)		□ 162 □ 140
(Number)	(Country)			ereto:
☐ Additional foreign application				
I hereby claim the benefit under	35 U.S.C. 119(e) of any United	d States provisional application	n(s) listed below.	
(Application Number) (Filing Date)		ling Date)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.	

(Filing Date)

DECLARATION – Utility or Design Patent Application and POWER OF ATTORNEY

As a below-named inventor, I hereby appoint the registered practitioners named below as my/our attorney(s) or agent(s) to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith:

> James E. Nilles, Reg. No. 16,663 Andrew J. Nilles, Reg. No. 31,786 Jay G. Durst, Reg. No. 41,723 Lisa M. Gehrke, Reg. No. 38,888 Stephen Michael Patton, Reg. No. 36,235

Thaddeus C. Stankowski, Reg. No. 45,522 Matthew C. Loppnow, Reg. No. 45,314 Jerome D. Drabiak, Reg. No. 31,011 Lisa A. Brzycki, Reg. No. 40,926 Matthew M. Eslami, Reg. No. 45,488

☐ A petition has been filed for this unsigned inventor

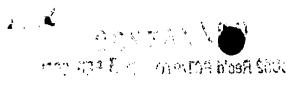
Direct all telephone calls to James E. Nilles at telephone number (414) 276-0977, facsimile number (414) 276-0982.

Direct all correspondence to: James E. Nilles

NILLES & NILLES, S.C. Firstar Center, Suite 2000 777 East Wisconsin Avenue Milwaukee, WI 53202-5345

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of Sole or First Inventor:	☐ A petition has been filed for this unsigned inventor		
Given Name (first & middle [if any]) and Family Name or Surname	: Qun WEI		
Inventor's Signature:	Date:		
Residence (city, state, country): Beijing, China	Citizenship: Chinese		
Mailing Address:			
(city, state, zip, country):			
Full name of Second Inventor, if any:	☐ A petition has been filed for this unsigned inventor		
Given Name (first & middle [if any]) and Family Name or Surname	e: Mingshan YAN		
Inventor's Signature:	Date:		
Residence (city, state, country): Beijing, China	Citizenship: Chinese		
Mailing Address:			
(city, state, zip, country):			
Full name of Third Inventor, if any:	☐ A petition has been filed for this unsigned invento		
Given Name (first & middle [if any]) and Family Name or Surname	e: Qinshan GAO		
Inventor's Signature:			
Residence (city, state, country): Beijing, China	Citizenship: Chinese		
Mailing Address:			
(city, state, zip, country):			



DECLARATION – Utility or Design Patent Application and POWER OF ATTORNEY

Full name of Fourth Inventor, if any:	☐ A petition has been filed for this unsigned inventor		
Given Name (first & middle [if any]) and Family Name or Surname: Gu	ohua JIANG		
Inventor's Signature:	Date:		
Residence (city, state, country): Beijing, China	Citizenship: Chinese		
Mailing Address:			
(city, state, zip, country):			
Full name of Fifth Inventor, if any:	☐ A petition has been filed for this unsigned inventor		
Given Name (first & middle [if any]) and Family Name or Surname: Mu	ilan LIAN		
Inventor's Signature:	Date:		
Residence (city, state, country): Beijing, China	Citizenship: Chinese		
Mailing Address:			
(city, state, zip, country):			
Full name of Sixth Inventor, if any:	☐ A petition has been filed for this unsigned inventor		
Given Name (first & middle [if any]) and Family Name or Surname: Ya	n CHEN		
Inventor's Signature:	Date:		
Residence (city, state, country): Beijing, China	Citizenship: Chinese		
Mailing Address:			
(city, state, zip, country):			
Full name of Seventh Inventor, if any:	☐ A petition has been filed for this unsigned inventor		
Given Name (first & middle [if any]) and Family Name or Surname:			
Inventor's Signature:	Date:		
Residence (city, state, country):			
Mailing Address:			
(city, state, zip, country):			

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